

Invoice, receipt or
transaction number:

705040

CERTIFICATE FOR EXEMPT PURCHASES

Transaction date: Month _____ Day _____ Year _____

The purpose of this Certificate for Exempt Purchases is to release the merchant seller from his or her obligation of collecting and remitting the sales and use tax on the sale for which this Certificate for Exempt Purchases is issued.

PART I MERCHANT SELLER'S INFORMATION

Seller's name Amway de Puerto Rico Inc. (Local Address: CORR 174, K.M. 1.7 Mirillas,
Address 7575 Fulton East Ada PR 49355 Bayamon
Mail Code 56-3T Municipality, State Zip Code

PART II PURCHASER'S INFORMATION

1.a. I certify that I am engaged in business in Puerto Rico and that my Merchant's Registration number is: 0082883-0019

b. The North American Industry Classification System (NAICS) code that appears on my Merchant's Registration Certificate

is 422000 and the activity's description is the following: Wholesale Trade, Non durable

2. If you are an agency of the Commonwealth of Puerto Rico or the Federal Government, provide your employer identification number: Goods

3. If you are a diplomat, provide the tax exemption number that appears on the exemption card issued by the United States Department of State:

 and the expiration date: Month _____ Day _____ Year _____

4. If you are an individual affected by a disaster (Section 6187 of the Puerto Rico Internal Revenue Code of 1994, as amended (Code)), provide your driver's license or passport number:

5. Indicate the reason for the exemption or exclusion and provide the requested information, as applicable:

- a. ☐ Reseller
- b. ☐ Manufacturing Plant
- c. ☒ Business to Business Services
- d. ☐ Federal Government (Agency _____)
- e. ☐ Commonwealth of Puerto Rico (Agency _____)
- f. ☐ Farmer (Bona Fide Farmer's Number _____)
- g. ☐ Direct Pay Permit (Total Exemption Certificate Number _____)
- h. ☐ Savings and Credit Cooperative or Cooperative Ruled by Act No. 239 of September 1, 2004
- i. ☐ Diplomat (Country or Mission _____)
- j. ☐ Special Acts (Act No. _____)
- k. ☐ Exportation
- l. ☐ Higher Education Institution, as provided by Act No. 106 of July 11, 2008
- m. ☐ Individual Affected by a Disaster (Section 6187 of the Code)

6. I am engaged in the business of wholesaling and I mainly sell health, nutrition and beauty products

7. I am purchasing:

- a. ☒ Tangible personal property for resale
- b. ☐ Raw materials
- c. ☐ Machinery and equipment used in manufacturing
- d. ☐ Services provided to a business
- e. ☐ Tangible personal property according to special exemption granted under classifications 5.d. through 5.m. indicated above.

8. Describe the tangible personal property, services, raw materials, or machinery and equipment that you are purchasing:

Amway de Puerto Rico is a direct selling organization that maintains a collection agreement with the Commonwealth of Puerto Rico. Sales tax is collected and remitted on behalf of our independent Business Operators

PART III PURCHASER'S CERTIFICATION

I hereby declare under penalties of perjury that this certificate has been examined by me, and that to the best of my knowledge and belief all the information provided herein is true, correct and complete. I also certify that:

- I am entitled to claim an exemption as indicated on line 5 of Part II, or I am duly authorized to represent the purchaser in the signature of this Certificate for Exempt Purchases.
- I will only use this certificate to buy taxable items for which I am entitled to claim an exemption or exclusion.
- If I acquire taxable items, but I use or consume them for non-exempt purposes in Puerto Rico, I will report and pay the sales and use tax directly to the Department of the Treasury.

Purchaser's name Susan Kearney-Huffman

Purchaser's signature: [Signature]

Address 7575 Fulton East

Municipality Ada

State PR

Zip Code

49355

Telephone

(616) 789-8431